

APPLICATION DATA SHEET

APPLICATION TYPE:

APPLICATION INFORMATION

Original

SUBJECT MATTER:

Gasifier and method

TITLE:

**PYROLYZING GASIFICATION SYSTEM AND METHOD
OF USE**

ATTORNEY DOCKET NUMBER:

MSH - 275

SUGGESTED DRAWING FIGURE:

1A

TOTAL DRAWING SHEETS:

26

SMALL ENTITY:

Y

APPLICANT INFORMATION

APPLICANT AUTHORITY TYPE:

Inventor

PRIMARY CITIZENSHIP/COUNTRY:

US

GIVEN NAME:

Robert

MIDDLE NAME:

G.

FAMILY NAME:

Graham

CITY OF RESIDENCE:

Presque Isle

STATE OF RESIDENCE:

Michigan

COUNTRY OF RESIDENCE:

US

STREET MAILING ADDRESS:

6027 East Grand Lake Road

CITY OF MAILING ADDRESS:

Presque Isle

STATE:

Michigan

COUNTRY:

US

ZIP CODE:

49777

APPLICANT INFORMATION

APPLICANT AUTHORITY TYPE:

PRIMARY CITIZENSHIP/COUNTRY:

GIVEN NAME:

MIDDLE NAME:

FAMILY NAME:

CITY OF RESIDENCE:

STATE OF RESIDENCE:

COUNTRY OF RESIDENCE:

STREET MAILING ADDRESS:

CITY OF MAILING ADDRESS:

STATE:

COUNTRY:

ZIP CODE:

CORRESPONDENCE INFORMATION

| | |
|-------------------------|----------------------------------|
| CUSTOMER NUMBER: | 008131 |
| NAME: | McKellar Stevens, PLLC |
| STREET: | 784 South Poseyville Road |
| CITY: | Midland |
| STATE: | Michigan |
| COUNTRY: | US |
| ZIP CODE: | 48640 |
| PHONE NUMBER: | (989) 631-4551 |
| FAX NUMBER: | (989) 631-4584 |
| E-MAIL ADDRESS: | RLMCKELLAR@MSH-IPLAW.com |

REPRESENTATIVE INFORMATION

| | |
|---------------------------------------|---------------|
| REPRESENTATIVE CUSTOMER NUMBER | 008131 |
|---------------------------------------|---------------|

ASSIGNMENT INFORMATION

ASSIGNEE NAME:

MAILING ADDRESS

STREET:

CITY:

STATE:

ZIP CODE:

COUNTRY: